

Sheet1

Circulated By	SD	Signer	Page Num	Full address	City
Bryan DeLong	22	Rollie Shatkins	513	3801 VAN BUREN RD	Kenosha

AFFIDAVIT

STATE OF WISCONSIN)
Kenosha COUNTY) SS

Rollie Shatkias being first duly sworn on oath, deposes and states as follows:

1. I am an adult resident of the 22 State Senate District and I am a qualified elector, i.e., either registered to vote or eligible to register and vote.

2. On 3/2 at IRVING, I spoke with an individual who was soliciting passersby to sign a document.

4. Bryan Dolan ask me to sign a petition for
Bob Wirth and I asked him what it was for
and he said to recall Bob Wirth so he will come
back to Wisconsin.

5. Had I not been misled about the purpose or effect of the petition, I would not have signed it. I do not and have not supported efforts to have a recall election held for Senator Wirth's seat.

Rollie Shatkias
[NAME]

Subscribed and sworn to before me this
29th day of April, 2011.

[Signature]
Notary Public, State of Wisconsin
My Commission Exp. 3-25-2011

RECALL PETITION

TO: Wisconsin Government Accountability Board

(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District

(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin

(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.



THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. <u>Rolli Shee</u>	<u>3801-Van Buren Rd</u> <u>Kenosha, WI 53142</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Kenosha</u>	<u>3/2/11</u>
2. <u>John Bellino</u>	<u>542 Newman Rd</u> <u>Racine WI</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	<u>3/2/11</u>
3. <u>Samuel L.</u>	<u>4301-18th St</u> <u>Kenosha, WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Somers</u>	<u>3/2/11</u>
4. <u>Don Butler</u>	<u>1640 Meadowlane Ave</u> <u>Racine, WI 53406</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Mt. Pleasant</u>	<u>3/2/11</u>
5. <u>Jean Burke</u>	<u>1640 Meadowlane Ave</u> <u>Racine, WI 53406</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Mount Pleasant</u>	<u>3/2/11</u>
6. <u>Stephen Irving</u>	<u>4216-85th St.</u> <u>Kenosha, WI 53142</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Pleasant Prairie</u>	<u>3-2-11</u>
7. <u>Robert J Karlos</u>	<u>4304 WASHINGTON RD</u> <u>KENOSHA, WI 53144</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>SOMER'S</u>	<u>3-2-11</u>
8. <u>Jerry M. Etchemullen</u>	<u>1458 16th Ave Apt 105</u> <u>Kenosha, WI 53140</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Kenosha</u>	<u>3-2-11</u>
9. <u>Phillip M. Wendling</u>	<u>6029-49th Ave</u> <u>Kenosha, WI 53142</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Kenosha</u>	<u>3-2-11</u>
10. <u>Dan A. Wendling</u>	<u>3527-16th Ave 53140</u> <u>Kenosha, WI</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Kenosha</u>	<u>3-2-11</u>

Certification of Circulator

I, Bryan DeLong, certify:

(name of circulator)

I reside at 2817 Washington Rd Kenosha, WI 53140

(circulator's residence - include number, street, and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under §.12.13(3)(a), Wis. Stats.

3-5-11
(date)

Bryan DeLong
(signature of circulator)

Please mail this form to: Recall Wirch

P.O. Box 26 • Silver Lake, WI 53170

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